

UNITED STATES DISTRICT COURT

ATTACHMENT 5

District of

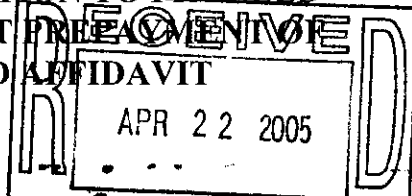
CHRISTOPHER A MOORE

Plaintiff

V.

10 TEMPLE PLACE
LIMITED PARTNERSHIP

Defendant

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

CASE NUMBER

05-10853 MLW

I, CHRISTOPHER A MOORE declare that I am the (check appropriate box)☒ petitioner/plaintiff/movant☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☐ Yes ☒ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration _____

Are you employed at the institution? _____ Do you receive any payment from the _____

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

JUNE 30, 1999 - Framingham Civic League 214 Concord ST
Framingham, MA @ \$25,000 - 6 months

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input checked="" type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

AO 240 Reverse (Rev. 9/96)

Received Rent from Tenant - \$560.00 a month

4. Do you have **any** cash or checking or savings accounts? ☒ Yes ☐ No

If "Yes," state the total amount. \$200

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☒ Yes ☐ No

If "Yes," describe the property and state its value.

My Home - 180,000
Car - 3,000

(Declared Bankruptcy Last year)

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

I declare under penalty of perjury that the above information is true and correct.

4/20/2005
Date

[Signature]
Signature of Applicant
6174425999

NOTICE TO PRISONER: A Prisoner seeking to proceed IFP shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

1000
1000

UNITED STATES DISTRICT COURT

District of

CHRISTOPHER A. MOORE

ATTACHMENT 4

MARY LOU MOORE ESTATE

SUMMONS IN A CIVIL CASE

V.

VALUE OPTIONS, INC., RONALD DOZORETZ,
THOMAS ORAM, REBECCA WHITE, NEW
ENGLAND MEDICAL CENTER HOSPITALS, INC., CASE NUMBER:
LINDA SAHOVEY, MARSHALL FOLSTEIN, ELLEN
ZANE, TEN TEMPLE PLACE LIMITED
PARTNERHSIP, FALLON SERVICE INC.,
TIMOTHY FALLON, FEDERAL MANAGEMENT
COMPANY INC. BETTE ANDERSON FISH,
GILLIAN GATTE, STEPHEN WILCHINS,
MARY GAVIN, RICHARD HENKEN, ALLEN PERKINS

TO: (Name and address of Defendant)

10 Temple Place Limited Partnership
175 Federal Street, Suite 700
Boston, MA 02110

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

an answer to the complaint which is herewith served upon you, within _____ days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

2005 APR 22 P 4: 56

CLERK

DATE

(By) DEPUTY CLERK

SSVH
JUN 1 2005